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## \* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/472,686 05/22/2003 *OK* *KFW*

## \* FOREIGN APPLICATIONS \*\*\*\*\*

*none* *KFW*

## F REQUIRED, FOREIGN FILING LICENSE GRANTED

\* 06/24/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	TX	10	71	5

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## TITLE

DIRECTIONAL ELECTROMAGNETIC WAVE RESISTIVITY APPARATUS AND METHOD

FILING FEE  RECEIVED 1990	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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